

Care Coordination News



October 2023

Issues of **Care Coordination News** often refer to different UCare forms. All UCare Care Coordination forms are on the UCare website under the [Care Managers and Care Coordination](#) page.

Care Coordination-related questions can be directed to the Clinical Liaison mailbox's:

- **MSC+/MSHO** [MSC MSHO Clinicalliaison@ucare.org](mailto:MSC_MSHO_Clinicalliaison@ucare.org) or by phone: 612-294-5045 or 1-866-613-1395
- **Connect/Connect + Medicare**: SNBCClinicalliaison@ucare.org or by phone: 612-676-6625 or 1-833-951-3190

Enrollment related questions can be directed to:

- **MSC+/MSHO enrollment** at 612-676-6622 or by email CMIntake@ucare.org
- **UCare Connect/Connect+ Medicare enrollment by** email at connectintake@ucare.org

In this issue:
[All Care Coordination News](#)
[Connect/Connect + Medicare News](#)
[Quality Review Corner](#)
[MSC+ and MSHO News](#)
[DHS News](#)
[Reminders](#)

2023 UCare Care Coordination Meeting Schedule

UCare Care Coordinators are required to participate in the live WebEx or view the recorded WebEx. WebEx registration or a signed attendance sheet is required. The recorded Webex will be uploaded to the website about a week after the live quarterly meeting.

UCare Product	Meeting Type	Date & Time (Subject to change)
MSC+/MSHO and Connect/Connect + Medicare	Live Quarterly Meeting	December 12 th , 9:00 am
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	November 14 th 2:00 – 4:00 Working with People Who Have a Dual Diagnosis: Strategies for Successful Outcomes- Invitation to follow!
MSC+/MSHO	Office Hours (optional)	October 24th, 10:00-11:00
Connect/Connect + Medicare	Office Hours (optional)	October 24th, 1:30-2:30

Upcoming Office Hours



Register [here](#) for Connect/Connect + Medicare Office Hours

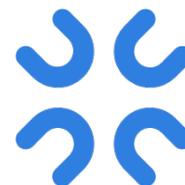
Register [here](#) for MSC+ and MSHO Office Hours

ALL CARE COORDINATION NEWS

New on the Care Management and Care Coordination Website

All products

- Reconciling Enrollment Rosters Job Aid (NEW 10/2/2023)
- 3rd Quarterly All Care Coordination Meeting (Recording)
 - PowerPoint Slides
 - Attendance Log
- Support Plan Signature Sheet-MnCHOICES (NEW 9/29/2023)



Coming Soon

- MSC+ and MSHO In-Person Assessment Methods Decision Tree (NEW)
- In-Person Assessments FAQ (NEW)
- In-person Assessments Job Aid Connect/Connect + Medicare (NEW)
- In-person Assessments Job Aid MSC+/MSHO (NEW)Connect Requirements Grid (Revised 11/1/23)
- MnCHOICES Connect and Connect + Medicare Requirements Grid (Revised 11/1/23)
- Connect and Connect + Medicare Requirements Grid (Revised 11/1/23)
- MSC+/MSHO Community Care Coordination Requirements Grid (Revised 11/1/23)
- MSC+/MSHO Institutionalized Care Coordination Requirements Grid (Revised 11/1/23)
- MnCHOICES MSC+/MSHO Community Care Coordination Requirements Grid (Revised 11/1/23)

Third Quarterly All Care Coordination Meeting Update



The 3rd All Care Coordination Quarterly Meeting is posted to the website. UCare presented the annual Model of Care (MOC) during this meeting. If you attended the meeting live, you are all set for your annual MOC training requirements. If you were unable to attend in person, please view by **October 31st, 2023** and complete the [electronic attendance log](#) to get credit for viewing the quarterly meeting and MOC.

NEW! MnCHOICES Support Plan Signature Sheet

DHS has released a new stand-alone signature sheet for use when completing MnCHOICES Assessment or HRA-MCO and the member is not able to sign during the assessment. The signature sheet is **required** when the MnCHOICES electronic signature is not used and can be downloaded from the MnCHOICES Help Center and searching "support plan". UCare has also uploaded this document to the Care Coordination website.

Attached to this newsletter communication you will find two example signature sheets with instructions on how to complete, one for Connect/Connect + Medicare and another for MSC+/MSHO.

Noteworthy instruction regarding "Materials Shared" section*:

1. Data privacy practices that explain my right to confidentiality can be marked "Yes."
 - a. UCare shares Data privacy practices with every member upon enrollment and informs the member they may request new copies annually.
2. Minnesota Health Care Programs DHS 3182 can be marked "Not applicable."
3. My right to appeal DHS 1941
 - a. Appeal rights are included in UCare's Support Plan Letter and Support Plan Signature Letter. This section is marked "Yes" when accompanied by either of these documents.

*See example documents attached for additional notes.

Welcome Our New Clinical Liaison

My name is Katie Osborne, and I am excited to be joining the UCare team as the newest Connect/Connect + Medicare Clinical Liaison. I am a licensed Independent Social Worker living in the east metro Twin Cities area.

I have 7 years of experience in care coordination as both a care coordinator and as a team lead working both as a delegate and within the health plans. I also worked for 5 years as a dialysis social worker and often partnered with care coordinators. I am passionate about training care coordinators and developing helpful resources for care coordinators to use.

In my spare time I enjoy gardening, watching movies, traveling, hiking, and trying out new restaurants. I look forward to getting to know everyone better and being a helpful resource here at UCare.



Transfer/Transitional Member Health Risk Assessment (THRA) IN MNCHOICES

In a recent DHS meeting it was shared that when a THRA is completed in MnCHOICES by using HRA type "Transitional HRA" within the HRA-MCO form, the MCO THRA document must also be completed and attached in MnCHOICES. DHS is actively building the THRA form in MnCHOICES that will meet MCO needs and avoid duplication. Once DHS develops the MnCHOICES THRA, the MCO THRA document will be retired.

HRA type
Transitional HRA

Transitional HRA type
Product change

UCare Soon to Retire Daily Admissions/Discharge Reports

What are UCare's next steps with this system?

To ensure delegates receive more accurate and timely information, UCare will be retiring the Daily Admissions/Discharge Report (DAR) and will be moving to DHS's MN Encounter Alert Service (EAS) vendor Point Click Care, previously Audacious Inquiry (AI) by 1/1/2024.

What does this mean for your agency:

- You will continue to receive notification of service authorizations and admissions to facilities not engaged with MN EAS.
- If your agency is not already enrolled, please reach out to Nick.Regier@pointclickcare.com to receive information and system access information.
- Once enrolled, log on to the EAS site daily for your member alerts instead of using the DAR and Sec FTP!
- Begin TOC activities upon notification.
 - Do not need to check for notifications on non-business days.
- Once a month – update EAS using your enrollment roster "All" tab to add/change assignment.

Minnesota Annual Fall Aging Conference

Registration for the 2023 Minnesota Annual Fall Aging Conference is open! The conference is held on Oct 26th, 2023, from 7:30-4:15 at Heritage Center of Brooklyn Center. There will be 6.0 CEUs offered, don't miss out! Click link in the title above for additional conference and registration information.



Returning to In-Person Assessments

Starting November 1st, 2023, all assessments are to be completed in-person. A televideo or telephonic assessment may be allowed only in certain circumstances as outlined in the table below and must have thorough documentation that an in-person assessment was offered. A new requirements grid will be effective November 1st addressing the change of returning to in-person member assessments.

Connect/Connect + Medicare:

	Offer First: In-Person	Offer Second: Televideo	Offer Third: Via Phone
INITIAL/ANNUAL: Connect/Connect + Med	X	X	Connect: X Connect + Med: *X *Conditional use with additional encounter requirements and robust documentation.

*Additional Encounter Requirements are defined in the 11/1/2023 Requirements Grids

MSC+ /MSHO:

	Offer First: In-Person	Offer Second: Televideo	Offer Third: Via Phone
INITIAL: MSC+/MSHO MnCHOICES or LTCC (EW or PCA)	X	NA	NA
INITIAL/ANNUAL: MSC+/MSHO No EW with PCA Services	X	NA	NA
INITIAL/ANNUAL: MSC+/MSHO EW with PCA	X	NA	NA
INITIAL/ANNUAL: MSC+/MSHO 3428H (No PCA, No EW, other Waivers)	X	X	MSC +: X MSHO: NA
ANNUAL: MSC+/MSHO EW without PCA	X	X	MSC+/MSHO conditional use with robust documentation
INITIAL/ANNUAL: MSC+/MSHO Institutional	X	X	MSC+: X MSHO: NA

Disease Management Program & Eligibility Overview

Disease Management (DM) engages with members living with chronic conditions. We provide programs for members across all product lines. Our programs focus on meeting members where they are at in their health journey.

Program topics include asthma, chronic obstructive pulmonary disease (COPD), chronic kidney disease (CKD), diabetes, hypertension, heart failure and migraines. Our delivery modes include reminder mailings, newsletters, phone apps, interactive voice response (IVR) or text message education, telemonitoring and one-to-one telephonic education and coaching programs.

Our team works closely with Care Coordination, Case Management, Pharmacy, Health Improvement, Health Promotions, and provider teams to assist members in self-management of their chronic condition. We accept referrals for all our programs and assist members in our program with referrals to other programs and resources. Visit <https://www.ucare.org/providers/policies-resources/disease-management> for more information.

	UCare Connect	UCare Connect + Medicare	UCare Medicare with M Health Fairview & North Memorial Health	UCare Medicare Plans	MinnesotaCare	Minnesota Senior Care Plus	UCare Minnesota Senior Health Options	Prepaid Medical Assistance Program	UCare Individual & Family Plans with M Health Fairview	UCare Individual & Family Plans
Asthma IVR/Text Program	X	X			X			X	X	X
Asthma IVR/Text Program	X	X			X			X	X	X
Asthma IVR/Text Program	X	X	X	X	X	X	X	X	X	X
CKD Program	X	X	X	X	X	X	X	X	X	X
COPD Program	X	X	X	X	X	X	X	X	X	X
Diabetes At-Risk IVR	X	X	X	X	X	X	X	X	X	X
Diabetes Health Coaching	X	X	X	X	X	X	X	X	X	X
Heart Failure Health Coaching	X	X	X	X	X			X	X	X
Heart Failure Medtronic Telemonitoring	X	X	X	X	X	X	X	X	X	X
Migrane Management	X	X			X	X		X		

Disease Management Referrals

Do you have a member that might benefit from one-on-one help for their chronic condition? Send us a referral! When a referral is received, the DM team identifies the appropriate program for the condition, reviews member eligibility, facilitates program enrollment, and follows up regarding the referral outcome. Referrals can be sent to:

- **DM Email:** Disease_mgmt2@ucare.org
- **DM Voicemail:** 612.294.6539 or 866.863.8303
- **DM Referral Forms:** <https://www.ucare.org/providers/policies-resources/disease-management>



Intensive Community Based Services (ICBS) Reminders

ICBS is a feet-on-the-street intensive community-based case management program for members who are on a Medicaid or Dual product and have a mental health or substance use disorder condition. ICBS Case Managers will go to the member wherever they are in the community. This could be in their home, at a hospital, a treatment facility, or wherever the member is residing. ICBS CM's can assist the member with referrals to mental health or substance use disorder resources, housing resources, food resources, SMRT referrals, and much more.

This service is offered in the following counties by the following agencies:

- Mental Health Resources: Anoka, Hennepin, Ramsey, Scott, Washington, Carver & Dakota
- Vail Place: Hennepin, Ramsey, Scott, & Anoka County
- Human Development Center: St. Louis, Lake, Carlton
- Zumbro Valley: Olmsted, Filmore, Dodge, Mower, Winona, Freeborn, Steele, Goodhue, and Wabasha
- Canvas Health: Isanti, Chisago, Pine, Kanabec, Mille Lacs
- Northern Pines (Currently on hold): Crow Wing, Morrison, Todd, Wadena, Cass, and Aitkin

When making a referral it is important that you identify all providers that are all part of the members Interdisciplinary Care Team. This will allow the ICBS CM to collaborate with existing providers or identify new providers the member may need. In addition to that please:

- Inform the member about the ICBS program and obtain their agreement to participate.
- If a member has a substance use disorder, you must obtain a signed Release of Information Form from the member for UCare to release SUD information.
- The member must have mental health diagnosis.
- Ensure that all fields on the form are completed.
- Email completed [referral](#) or any questions to MHSUDservices@ucare.org

CONNECT AND CONNECT + MEDICARE NEWS

Connect and Connect + Medicare Members Turning 65 Years Old

When a member turns 65 there are a lot of changes in their benefits that can be confusing. This is a great opportunity for care coordinators to have conversations with members to ensure they can make an educated decision about their health plan.

Some key conversations are:



- Confirm the member has identified their Primary Care Clinic (PCC). This is important as many MSHO and MSC+ members are assigned to a care coordinator based on their PCC.
- Describing the difference between MSHO and MSC+.
 - Eligible members must actively choose MSHO, or they will automatically default to MSC+. The [Comparison Grid: MSHO/MSC+](#) found in the member handout section of the Care Coordination website shows the additional benefits available to MSHO members.
- As members turn 65, they may benefit from remaining on the CADI waiver. Care Coordinator should collaborate with member's waiver case manager to ensure member is aware of waiver options.
- Address the transition of PCA from County to Care Coordinator.
 - When a member turns 65 and is receiving PCA services, the Care Coordinator should verify their PCA agency is in-network with UCare if the member plans to remain with UCare after turning 65.
- Discuss the potential of the member receiving a change of Care Coordinator.

- Changing Care Coordinators can be difficult. Assure the member you will communicate their current support plan for a smooth transition. Consider doing a 3-way call if needed for members who are especially nervous about the change.
- Remind the member they will get a new ID card(s) they need to share with medical providers and their pharmacy.
- Offer resources such as Senior Linkage Line or UCare Customer Service to verify provider networks.
- If UCare is not offered in their county for MSC+/MSHO, assist in finding other options. See the DHS 2023 [DHS-4840-ENG \(state.mn.us\)](https://www.dhs.gov/4840-ENG) for choices by county.

Brook Health App



The Brook Health Companion app is a personal health service, empowering people to own their health on their terms. The app lets members chat with health experts, join programs such as stress management or plant-based eating, as well as create custom reminders for taking medications or testing blood pressure or sugar as frequently as needed. Visit www.ucare.org/brook for more information.



Quality Review Corner



UCare's Quality Review Team would like to thank all the delegates that have participated in the Quality Reviews for 2023. Highlighted below are some examples of exceptional best practices found during the Quality Reviews. Watch for these shout-outs in future newsletters as we continue to feature best practices!

MSC+ /MSHO



- ★ **Essentia:** On every Care Plan reviewed, Care Coordinators documented member's complete list of medication names, doses, and frequency.
- ★ **Fairview Partners:** Care Coordinators completed a medication reconciliation on all members and evaluated if Medication Therapy Management (MTM) referral was appropriate.
- ★ **Southwest Health & Human Services:** Care Coordinators conducted investigative research by documenting good faith effort to locate member's current contact information and to coordinate with the county financial worker on all members.
- ★ **University of Minnesota Physicians:** Care Coordinators were thoroughly involved with their members' care by mailing out Advance Directives, scheduling medical appointments and transportation, confirming in-network providers, communicating with Assisted Living staff, following up with DME providers, and contacting Economic Assistance to ensure their member's EW gets open.

MSC+ AND MSHO NEWS

Revised MnCHOICES PCA Assessment Authorization

When a Revised MnCHOICES PCA Assessment is completed, please send the following documents to UCarePCA@ucare.org within 10 business days from the assessment date:

- PCA Communication Form
- Assessment Results: Functional Needs Summary
- Supplemental Summary Chart

If the member is choosing to use less PCA hours than assessment results indicate, include this information on the PCA Communication Form. The member should receive a copy of the MnCHOICES Assessment Summary mailed to them by the Care Coordinator.

DHS NEWS AND UPDATES



Gender-affirming Surgery Benefit

DHS has updated the MHCP Fee For Service (FFS) provider manual regarding the gender-affirming surgery benefit. The updates to this benefit were made following recommendations from the Health Services Advisory Council and align more closely with the current World Professional Association for Transgender Health standards of care. This will follow the 60-day implementation period criteria from the date of the notice on 9/12/23.

MHCP FFS Provider Manual

DHS has updated the MHCP FFS provider manual regarding the gender-affirming surgery benefit. The updates to this benefit were made following recommendations from the Health Services Advisory Council and align more closely with the current World Professional Association for Transgender Health standards of care. This will follow the 60-day implementation period criteria from the date of the notice on 9/12/23.

Update on Launch of MnCHOICES Revision Project

On Monday, Oct. 2, 2023, DHS will start Phase 2 of the partner-advised rolling launch of the revised MnCHOICES application first announced in April. With the completion of phase 1, each delegate partner should have 10% of care coordinators completing assessments within MnCHOICES and increase to 30% during Phase 2. As a reminder, if your agency receives a transfer on a member who has completed a MnCHOICES assessment, the receiving delegate needs to continue future assessments within the revised MnCHOICES application. Delegates need to have staff who are capable of working in the MnCHOICES application and continue to increase users with additional phase roll out.

For more information, go to the full announcement: [Update on launch of MnCHOICES revision project](#)

Electronic visit verification (EVV) launch date for home health providers

Minnesota Department of Human Services will launch EVV phase 4 for home health providers on Oct. 16, 2023. UCare sent letters to providers' MN-ITS mailboxes that include next steps for working in their chosen EVV system.

UCare will implement phase 4 as a soft launch to give providers, caregivers, and members receiving services time to learn the new system. We will not enforce compliance that would result in claim denials or reversals in 2023. We will monitor EVV usage and utilization to ensure providers are prepared until we publish compliance requirements and require providers to meet compliance thresholds. Providers working with a managed care organization (MCO) should contact their MCO with questions or concerns about EVV. Review the [MCO contacts for MHCP providers](#) webpage for MCO contact information.

REMINDERS

Frequently Change

Forms are updated regularly. Please remember to download forms directly from UCare's website. This will ensure you are using the most up-to-date version.

Updating Primary Care Clinic

All Care Coordinators should be confirming member's primary care clinics and completing the Primary Care Clinic Change Request form located on the [UCare website](#) in the Care System or County PCC/Care Coordination Change Process drawer. This will ensure members (MSC+/MSHO) are correctly assigned for care coordination while they are in the program and when they age in.

Coordination Questions?

We want to be a great resource to you when you have care coordination questions! For us to help you, please include as much detail as possible with your question(s): e.g., member name and ID number, date of birth, product, details about the situation and your name, phone number and email address.

All emails sent to UCare that include private member information **must** be sent via [UCare's Secure email Message Center](#). UCare is not able to open third party secure emails. You can create a secure email account using this [link](#).

UCare Care Coordination Contact Numbers

Please refer to the [Clinical Phone List](#) for Care Coordination delegate contact information.

Newsletter Article Requests

Is there a topic that should be covered in this newsletter? Please send all suggestions to MSC_MSHO_Clinicalliaison@ucare.org & SNBCClinicalLiaison@ucare.org.